

AUGUST 2018



South Carolina Radiological Society News

SCRS Mission

Our mission is the advancement of radiologic science, improving radiologic services to patients and the medical community, and studying the economics of radiology; the encouragement of improved and continuing education; and the establishment and maintenance of high medical and ethical standards in the practice of radiology.

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Message from the President

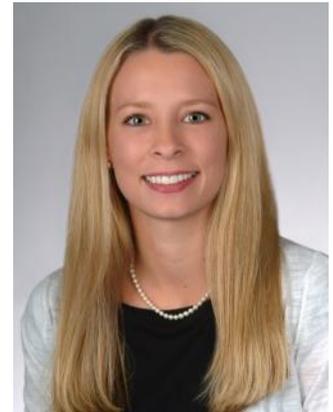
Madelene Lewis, MD

It has been a busy spring and summer for SCRS! The annual SCRS meeting was held in March at Wild Dunes. We had engaging talks from Dr. Bill Thorworth, CEO of the ACR, and Dr. Gregory Nicola, a member of the ACR Economics Committee. The SCRS approved the creation of the SCRS PAC and agreed to sign the new ACR Affiliation Agreement.

The SCRS delegation of twelve radiologists including representation from various private practices across the state, MUSC, and four residents attended the 2018 Annual ACR meeting in May. The meeting provided us with valuable information on economics, patient-centered care, artificial intelligence and advocacy/government relations. Of our SC attendees, we had 100% contribution to RADPAC and culminated the week with a visit to Capitol Hill. SCRS was recognized for our state annual meeting and awarded Excellence in Meetings and Education.

The executive structure of the ACR can seem daunting at first glance. The Council is the

legislative policy making body of the College. The Council acts upon recommendations, submitted as resolutions, presented during the annual meeting. In this way each ACR member through their chapter and the Council has a voice in the governing of the College as it establishes policy for all of radiology. The Council Steering Committee (CSC) oversees the activities of the Council. Together with the CSC, the Council facilitates communication with chapters and the Board of Chancellors (BOC). The allotted number of Councilors is based on a state chapter's membership (1 per every 100 members). SCRS is allotted four Councilor positions. Your state Councilors for 2018-19 are Matt Brady, Michael Brown, Naveen Parti and myself. We encourage you to reach out to us with feedback, suggestions, input, and questions. We are your voice and need to hear from you. In addition, I was appointed to CSC this year. In my role as a CSC member, I pledge to represent the Council during the 362 days we are not in session. We have workgroups



tasked with various strategic priorities. I am currently serving on a workgroup evaluating the relationship of the current and future state of the Council in an effort to make improvements in communication, engagement, and structure.

During the Chapter Leaders' workshop, we signed a new affiliation agreement between our state chapter and the ACR. The affiliation agreement defines the rights, duties and benefits of the ACR and its chapters and their respective roles in that collaboration. We share a primary obligation to serve the lifelong professional needs of our membership by delivering products and services of the highest quality, elevate the performance of our members, serve patients and society by empowering our members, and operate in a financially prudent manner.

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Member Outreach

Mike Brown, MD, Vice President

The SCRS Executive Council has continually sought ways to increase our outreach to all radiologists throughout the state. To this end, we are trying something new this year. We are planning to take our show on the road to host three regional events.

The goal of these events will be to increase engagement with our current members, and to encourage our members to become active in the SCRS and ACR at local, state, and national levels. We also plan to invite radiologists that are not currently SCRS/ACR members, with the hope that we can show them that our advocacy and educational efforts are worthy of their membership.

We plan to host events in the Greenville/Spartanburg region, in Charleston, and in the Myrtle Beach/Florence region. We envision a week-night dinner meeting, lasting two to three hours, which will be advertised to all

radiologists throughout the state. Each of the four programs will have a similar agenda – an initial social hour, a dedicated short presentation by a sponsor prior to dinner and multiple short presentations by an officer of the SCRS throughout the event. We hope that you will attend the event in your region, and you are more than welcome to attend multiple events if you wish to interact with other radiologists throughout the state.

In conjunction, we will revise the Annual Meeting in the spring of 2019 into a more streamlined governance and advocacy meeting. We will also continue to entertain an invited speaker from the ACR on these issues. Our hope is that we can engage members at our regional events to become involved in the SCRS. There will be opportunities to run for elected positions on the SCRS Executive Council as well as Councilor/Alternate

Councilor positions in the ACR at the SCRS Annual Meeting.

We hope that our outreach efforts will lead to an increase in membership involvement in our society as well as an increase in membership at our Annual meeting.

Advocacy Update

Matthew Brady, MD, Secretary



The 2nd regular session of the 122nd South Carolina General Assembly adjourned late this spring, ending the most recent two-year cycle of the state's legislation crafting body. There were four bills which came to the attention of the SCRS executive committee.

H3115 was introduced 1/10/2017 (https://www.scstatehouse.gov/sess122_2017-2018/bills/3115.htm) and sought to encourage the state to explore a blended public private approach to the uninsured, given that South Carolina did not expand Medicaid under the ACA. A parallel resolution was made by the SCMA in their annual session in 2017. This bill was referred to committee and died there.

H4839 was introduced 2/6/18 (http://www.scstatehouse.gov/sess122_2017-2018/bills/4839.htm) and sought to mandate coverage for CT calcium scoring and US carotid intimal thickness measurement. This bill was not submitted as a result of societal ACR, SCRS, or ACC efforts. This bill was referred to committee and died there.

H4116 was introduced 4/6/2017, passed 5/10/2018, and signed into law by the governor on 5/18/2018 (https://www.scstatehouse.gov/sess122_2017-2018/bills/4116.htm). From my understanding, this amends the 1976 Medical Practice Act in order to clarify that South Carolina state law explicitly does not require MOC for licensure, reimbursement, employment, or admitting privileges. We will seek clarification on whether this actually prohibits healthcare entities operating in South Carolina from requiring MOC in their own employment agreements or medical staff bylaws.

H345 was introduced 2/1/2017, ratified 5/14/2018, and signed into law by the governor on 5/18/2018 (https://www.scstatehouse.gov/sess122_2017-2018/bills/345.htm). This is a scope of practice bill in regards to ARPN. I will not claim to understand this bill in depth, but you may want to review the actual text or review SCMA resources on this bill. In regards to imaging, this may affect us in terms of the kinds of imaging requests we receive.

In regards to the ACR Hill Day in May, the SCRS delegation met with staffers from all seven South Carolina Congressional districts as well as with staffers from both Senate offices. As in the past, we advocated for HR1298, which is a bill that seeks to force CMS coverage of CT colonography, bringing it into line with the USPSTF recommendations. Another pair of bills discussed by the ACR was HR1904/S769, the Medicare Access to Radiology Care Act (MARCA, not to be confused with MACRA!). Without getting into depth, this bill would defer federal supervision requirements of Radiology Assistants (RAs) to the state level. As South Carolina is one of only 19 states that has NO formal legal recognition of RAs, the SCRS delegation decided not to address HR1904/S769 during our meetings with Congress.

Finally, many states have laws requiring coverage of breast tomosynthesis. South Carolina does not. The SCRS executive committee will be exploring the possibility of such a bill for the 123rd South Carolina General Assembly. If you are interested in working with us on this advocacy effort, please contact me, another member of the Executive Committee or our Executive Director.



Summer Update

Russell Chapin, MD, Treasurer

In July, the Centers for Medicare and Medicaid Services (CMS) released calendar year 2019 proposed rules for the Medicare Physician Fee Schedule (MPFS) and the hospital outpatient prospective payment system (HOPPS). The ACR has posted a preliminary summary of the proposed rules for MPFS and HOPPS online.

Under the proposed rule for the MPFS, CMS confirmed that clinical decision support (CDS) on radiology appropriateness use criteria (AUC) will be implemented on January 1, 2020. This program was mandated by the Protecting Access to Medicare Act (PAMA) of 2014 and originally scheduled for implementation in 2017. Furnishing providers (radiologists) will have to submit claims containing AUC consultation data, but CMS will not deny payments for incorrectly formatted claims until January 1, 2021. This year is being referred to as the “Educational and Operational Testing Period.”

Further updates within the proposal include an allowance that the consultation may be performed by “clinical staff working under the direction of the ordering professional” and the addition of independent diagnostic testing facilities to the list of settings in which AUC must be consulted and CDS documented. CMS had previously defined that physician’s offices, hospital outpatient departments, and ambulatory surgical centers were applicable settings. CMS has proposed a series of G codes and modifiers for claims processing and is considering the use of unique consultation identifiers, presumably generated by the clinical decision support vendor. Finally, the CY19 MPFS proposal delineates hardship exemptions for insufficient internet access, EHR or CDS vendor issues, or extreme circumstances such as natural or manmade disasters.

Other previously delineated details of the plan include that it

- Is limited to Medicare patients
- Excludes inpatients/Medicare part A claims
- Applies to CT, MRI, and Nuclear Medicine (including PET) services, but not ultrasound
- Must include clinical decision support at the time of order entry
- Must be provided through an approved qualified Clinical Decision Support Mechanism (qCDSM)
- Must utilize appropriate use criteria from a Qualified Provider Led Entity (PLE)
- Will require claims to include which qCDSM was consulted, the NPI of the ordering provider, and whether the exam was adherent, nonadherent, or not applicable to the AUC
- Will eventually identify outlying providers who do not meet a threshold of adherence to AUC and require them to undertake additional authorization steps for future orders
- Has priority clinical areas for claims review and identification of outliers including coronary artery disease, pulmonary embolism, lung cancer, headache/head injury, neck pain, low back pain, shoulder pain, and hip pain.

Because the qCDSM’s and even electronic health records are relatively immature, active planning for radiology CDS is required, despite the repeated delays in implementation. Inherently, the radiology CDS mandate puts radiology at risk while requiring ordering clinicians do the work at the time of order entry. Therefore, both clinicians and radiologists must be engaged in the radiology CDS process. One way to develop this dialogue is through the use of R-SCAN templates on topics such as imaging of low back pain, suspected pulmonary embolism, and headache, available from the ACR.

SC Resident Fellow Section Update

Alexandra Franklin, MD, Past President SC RFS

New Resident Arrivals in July 2018 (Class of 2022)

Daniel Cook, MD

Medical School: University of Louisville School of Medicine, Louisville, KY

Undergraduate: University of Kentucky, Lexington, KY

Marlee Croissy, MD

Medical School: Charles E. Schmidt College of Medicine, Boca Raton, FL

Undergraduate: University of Florida, Gainesville, FL

Will Dennis, MD

Medical School: Medical University of South Carolina

Undergraduate: Duke University, Durham, NC

Dzmitry Haviazheu, MD

Medical School: Medical University of South Carolina

Undergraduate: College of Charleston

Madison Kocher, MD

Medical School: Medical University of South Carolina

Undergraduate: Wake Forest University, Winston-Salem, NC

William Nixon, MD

Medical School: Medical College of Georgia, Augusta, GA

Undergraduate: University of Georgia, Athens, GA

Brielle Paolini, MD

Medical School: Wake Forest School of Medicine, Winston-Salem, NC

Undergraduate: College of William & Mary, Williamsburg, VA

Justin Reagan, MD

Medical School: Eastern Virginia Medical School, Norfolk, VA

Undergraduate: University of Michigan, Ann Arbor, MI

Lauren Snider, MD

Medical School: Medical University of South Carolina

Undergraduate: Clemson University, Clemson, SC

Trevor Stone, MD

Medical School: University of Louisville School of Medicine, Louisville, KY

Undergraduate: Marshall University, Huntington, WV

IR/DR Residents

Tony Gayed, MD

Medical School: Medical college of Rush University, Chicago, IL

Undergraduate: Franciscan University, Steubenville, OH

Stephen Stringfellow, MD

Medical School: Medical College of Georgia, Augusta, GA

Undergraduate: University of Georgia, Athens, GA

2018 MUSC Residency Graduates with Fellowships Taken

T. Mark Adams, MD – Abdominal Imaging, MUSC

Thomas Britt, MD – Abdominal Imaging, MUSC

Sean Creeden, MD – Neuroradiology, Stanford University, Stanford, CA

Nima Golchin, MD – Interventional Radiology, MUSC

John McGarity, DO – Musculoskeletal Imaging, MUSC

Jonathan Perry, MD – Interventional Radiology, MUSC

Amanda Schaefer, MD – Abdominal Imaging, University of California at San Francisco, San Francisco, CA

Newly Arrived MUSC Current Fellows

Neuroradiology Fellows:

Mary Beasley, MD – UAB, Birmingham, AL

Andrew Matthews, MD – Ochsner, New Orleans, LA

Ismail Kabakus, MD – Ishmael Hacettepe University

Interventional Radiology Fellows:

Enrique Rodriquez, MD - Henry Ford, Detroit, MI

Robert Grammer, MD – West Virginia University, Morgantown, WV



New SCRS Fellows of ACR

Dallas W. Lovelace, III, MD, FACR, Fellowship Chair

A major highlight of the annual meeting of the American college of Radiology is the Fellowship Convocation. It is a great honor to become a Fellow which is awarded to deserving members.

Dr. Leonie Gordon and Dr. Shawn Conwell were honored at the meeting in Washington in May 2018. Please congratulate them as Fellows of the American College of Radiology - FACR.

If you believe that you or

someone you know deserves to become a Fellow, go to ACR.org to view the qualifications. I know that many of our members meet the criteria .

Please contact me with any questions.

Dallas Wright Lovelace III,
MD, FACR

dwlovelace@regmed.com

2018 ACR Hill Day



The SCRS delegation met with Congressman Joe Wilson in the Capitol building. L to R: Chase Mitchell, MD, Jeffrey Waltz, MD, Rebecca Leddy, MD, Shawn Conwell, MD, FACR, Congressman Joe Wilson, Dallas Lovelace, III, MD, FACR, Russell Chapin, MD and Matt Brady, MD.

Message from the President, Continued

We are excited about the opportunities a state level PAC will provide us. Be on the lookout for more information in the coming months and I hope you will consider financially supporting the SCRS PAC. As we begin a new fiscal year at SCRS, please contact any member of the Executive Committee with any questions, suggestions, or concerns you may have about our state society. I encourage each of you to participate more actively in SCRS. Whether you are interested in networking with our membership, monitoring and advocating with state government, volunteering on a committee, or representing radiology at the SCMA, we would be honored to have you join us.

Summer Update, Continued

suspected pulmonary embolism, and headache, available from the ACR.

MPFS ACR summary of proposed CY19 rule: <https://www.acr.org/Media-Center/ACR-News-Releases/2018/MPFS-Proposed-Rule-Updates-CDS-Implementation>

HOPPS ACR summary of proposed CY19 rule: <https://www.acr.org/Advocacy-and-Economics/Advocacy-News/Advocacy-News-Issues/In-the-July-28-2018-Issue/CMS-Releases-CY-2019-HOPPS-Proposed-Rule>

SC Resident Fellow Update

Womens' Imaging

Ella Clarke, MD – University of Kentucky, Lexington, KY

Hillary George, MD – Memorial Health, Savannah, GA

2018 MUSC Fellowship Graduates with Jobs Taken

Neuroradiology Fellows

Michael Busch, MD – private practice, Athens, GA

Alex Harvin, MD – private practice, Clear Lake, IA

Patrick Mullin, DO – private practice, Springfield, MO

Dhruv Patel, MD – Memorial Health, Savannah, GA

Women's Imaging Fellows

Jan Ter Louw, MD – private practice, Ocala, FL

Karen Patrick, MD – Upstate Carolina Radiology - Spartanburg, SC

Musculoskeletal Imaging Fellows

Romney Miller, MD – undecided

Abdominal Imaging Fellows

Kevin Gibbs, MD - Pitts Radiological Associates, Columbia, SC

Interventional Radiology Fellows

Sarah Allgeier, MD – McLeod Regional Center, Florence, SC

Jonathan Botstein, MD – Pitts Radiological Associates, Columbia, SC

Nick Mazal, MD – Charleston Radiologists, Charleston, SC

Kyle VanMiddlesworth, MD – private practice, New Bern, NC

Nuclear Medicine Fellow

B. J. Reiter, MD – Medical University of South Carolina

2018-19 SCRS Executive Committee



Madelene Lewis, MD
President
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Francis Vento, MD
RFS President
Medical University of SC
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2019 Councilors to ACR

Madelene Lewis, MD, Medical University of SC

Matthew Brady, MD, Roper Radiologists

Michael Brown, MD, Carolinas Radiology/Myrtle Beach

Naveen Parti, MD, MBA, GHS UMG Radiology

2019 Alternate Councilors to ACR

Russell Chapin, MD, Medical University of SC

W. Shawn Conwell, MD, FACR, Carolinas Radiology/Florence

Dallas Lovelace, III, MD, FACR., Orangeburg

Paul Kountz, MD, PhD, FACR, Upstate Carolina Radiology

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